

| CLAIMS ONLY     |          |        |                       |        |                        |        | Application Number<br><div style="font-size: 1.5em; font-family: cursive;">09751826</div> |        | Filing Date |        |  |
|-----------------|----------|--------|-----------------------|--------|------------------------|--------|---|--------|-------------|--------|--|
|                 |          |        |                       |        |                        |        | Applicant(s)  |        |             |        |  |
|                 |          |        |                       |        |                        |        | * May be used for additional claims or amendments   |        |             |        |  |
| CLAIMS          | AS FILED |        | AFTER FIRST AMENDMENT |        | AFTER SECOND AMENDMENT |        |   |        |             |        |  |
|                 | Indep    | Depend | Indep                 | Depend | Indep                  | Depend | Indep   | Depend | Indep       | Depend |  |
| 1               |          |        |                       |        |                        |        |   |        |             |        |  |
| 2               |          |        |                       |        |                        |        |   |        |             |        |  |
| 3               |          |        |                       |        |                        |        |   |        |             |        |  |
| 4               |          |        |                       |        |                        |        |   |        |             |        |  |
| 5               |          |        |                       |        |                        |        |   |        |             |        |  |
| 6               |          |        |                       |        |                        |        |   |        |             |        |  |
| 7               |          |        |                       |        |                        |        |   |        |             |        |  |
| 8               |          |        |                       |        |                        |        |   |        |             |        |  |
| 9               |          |        |                       |        |                        |        |   |        |             |        |  |
| 10              |          |        |                       |        |                        |        |   |        |             |        |  |
| 11              |          |        |                       |        |                        |        |   |        |             |        |  |
| 12              |          |        |                       |        |                        |        |   |        |             |        |  |
| 13              |          |        |                       |        |                        |        |   |        |             |        |  |
| 14              |          |        |                       |        |                        |        |   |        |             |        |  |
| 15              |          |        |                       |        |                        |        |   |        |             |        |  |
| 16              |          |        |                       |        |                        |        |   |        |             |        |  |
| 17              |          |        |                       |        |                        |        |   |        |             |        |  |
| 18              |          |        |                       |        |                        |        |   |        |             |        |  |
| 19              |          |        |                       |        |                        |        |   |        |             |        |  |
| 20              |          |        |                       |        |                        |        |   |        |             |        |  |
| 21              |          |        |                       |        |                        |        |   |        |             |        |  |
| 22              |          |        |                       |        |                        |        |   |        |             |        |  |
| 23              |          |        |                       |        |                        |        |   |        |             |        |  |
| 24              |          |        |                       |        |                        |        |   |        |             |        |  |
| 25              |          |        |                       |        |                        |        |   |        |             |        |  |
| 26              |          |        |                       |        |                        |        |   |        |             |        |  |
| 27              |          |        |                       |        |                        |        |   |        |             |        |  |
| 28              |          |        |                       |        |                        |        |   |        |             |        |  |
| 29              |          |        |                       |        |                        |        |   |        |             |        |  |
| 30              |          |        |                       |        |                        |        |   |        |             |        |  |
| 31              |          |        |                       |        |                        |        |   |        |             |        |  |
| 32              |          |        |                       |        |                        |        |   |        |             |        |  |
| 33              |          |        |                       |        |                        |        |   |        |             |        |  |
| 34              |          |        |                       |        |                        |        |   |        |             |        |  |
| 35              |          |        |                       |        |                        |        |   |        |             |        |  |
| 36              |          |        |                       |        |                        |        |   |        |             |        |  |
| 37              |          |        |                       |        |                        |        |   |        |             |        |  |
| 38              |          |        |                       |        |                        |        |   |        |             |        |  |
| 39              |          |        |                       |        |                        |        |   |        |             |        |  |
| 40              |          |        |                       |        |                        |        |   |        |             |        |  |
| 41              |          |        |                       |        |                        |        |   |        |             |        |  |
| 42              |          |        |                       |        |                        |        |   |        |             |        |  |
| 43              |          |        |                       |        |                        |        |   |        |             |        |  |
| 44              |          |        |                       |        |                        |        |   |        |             |        |  |
| 45              |          |        |                       |        |                        |        |   |        |             |        |  |
| 46              |          |        |                       |        |                        |        |   |        |             |        |  |
| 47              |          |        |                       |        |                        |        |   |        |             |        |  |
| 48              |          |        |                       |        |                        |        |   |        |             |        |  |
| 49              |          |        |                       |        |                        |        |   |        |             |        |  |
| 50              |          |        |                       |        |                        |        |   |        |             |        |  |
| Total<br>Indep  |          |        |                       |        |                        |        |   |        |             |        |  |
| Total<br>Depend |          |        |                       |        |                        |        |   |        |             |        |  |
| Total<br>Claims |          |        |                       |        |                        |        |   |        |             |        |  |

Application Number: 09751826

|             |  |
|-------------|--|
| Filing Date |  |
|-------------|--|

Applicant(s)

\* May be used for additional claims or amendments

| CLAIMS       | AS FILED |        | AFTER FIRST AMENDMENT |        | AFTER SECOND AMENDMENT |        |
|--------------|----------|--------|-----------------------|--------|------------------------|--------|
|              | Indep    | Depend | Indep                 | Depend | Indep                  | Depend |
| 1            |          |        |                       |        |                        |        |
| 2            |          |        |                       |        |                        |        |
| 3            |          |        |                       |        |                        |        |
| 4            |          |        |                       |        |                        |        |
| 5            |          |        |                       |        |                        |        |
| 6            |          |        |                       |        |                        |        |
| 7            |          |        |                       |        |                        |        |
| 8            |          |        |                       |        |                        |        |
| 9            |          |        |                       |        |                        |        |
| 10           |          |        |                       |        |                        |        |
| 11           |          |        |                       |        |                        |        |
| 12           |          |        |                       |        |                        |        |
| 13           |          |        |                       |        |                        |        |
| 14           |          |        |                       |        |                        |        |
| 15           |          |        |                       |        |                        |        |
| 16           |          |        |                       |        |                        |        |
| 17           |          |        |                       |        |                        |        |
| 18           |          |        |                       |        |                        |        |
| 19           |          |        |                       |        |                        |        |
| 20           |          |        |                       |        |                        |        |
| 21           |          |        |                       |        |                        |        |
| 22           |          |        |                       |        |                        |        |
| 23           |          |        |                       |        |                        |        |
| 24           |          |        |                       |        |                        |        |
| 25           |          |        |                       |        |                        |        |
| 26           |          |        |                       |        |                        |        |
| 27           |          |        |                       |        |                        |        |
| 28           |          |        |                       |        |                        |        |
| 29           |          |        |                       |        |                        |        |
| 30           |          |        |                       |        |                        |        |
| 31           |          |        |                       |        |                        |        |
| 32           |          |        |                       |        |                        |        |
| 33           |          |        |                       |        |                        |        |
| 34           |          |        |                       |        |                        |        |
| 35           |          |        |                       |        |                        |        |
| 36           |          |        |                       |        |                        |        |
| 37           |          |        |                       |        |                        |        |
| 38           |          |        |                       |        |                        |        |
| 39           |          |        |                       |        |                        |        |
| 40           |          |        |                       |        |                        |        |
| 41           |          |        |                       |        |                        |        |
| 42           |          |        |                       |        |                        |        |
| 43           |          |        |                       |        |                        |        |
| 44           |          |        |                       |        |                        |        |
| 45           |          |        |                       |        |                        |        |
| 46           |          |        |                       |        |                        |        |
| 47           |          |        |                       |        |                        |        |
| 48           |          |        |                       |        |                        |        |
| 49           |          |        |                       |        |                        |        |
| 50           |          |        |                       |        |                        |        |
| Total Indep  |          |        |                       |        |                        |        |
| Total Depend |          |        |                       |        |                        |        |
| Total Claims |          |        |                       |        |                        |        |

\* May be used for additional claims or amendments

|              | Indep | Depend | Indep | Depend | Indep | Depend |
|--------------|-------|--------|-------|--------|-------|--------|
| 51           |       |        |       |        |       |        |
| 52           |       |        |       |        |       |        |
| 53           |       |        |       |        |       |        |
| 54           |       |        |       |        |       |        |
| 55           |       |        |       |        |       |        |
| 56           |       |        |       |        |       |        |
| 57           |       |        |       |        |       |        |
| 58           |       |        |       |        |       |        |
| 59           |       |        |       |        |       |        |
| 60           |       |        |       |        |       |        |
| 61           |       |        |       |        |       |        |
| 62           |       |        |       |        |       |        |
| 63           |       |        |       |        |       |        |
| 64           |       |        |       |        |       |        |
| 65           |       |        |       |        |       |        |
| 66           |       |        |       |        |       |        |
| 67           |       |        |       |        |       |        |
| 68           |       |        |       |        |       |        |
| 69           |       |        |       |        |       |        |
| 70           |       |        |       |        |       |        |
| 71           |       |        |       |        |       |        |
| 72           |       |        |       |        |       |        |
| 73           |       |        |       |        |       |        |
| 74           |       |        |       |        |       |        |
| 75           |       |        |       |        |       |        |
| 76           |       |        |       |        |       |        |
| 77           |       |        |       |        |       |        |
| 78           |       |        |       |        |       |        |
| 79           |       |        |       |        |       |        |
| 80           |       |        |       |        |       |        |
| 81           |       |        |       |        |       |        |
| 82           |       |        |       |        |       |        |
| 83           |       |        |       |        |       |        |
| 84           |       |        |       |        |       |        |
| 85           |       |        |       |        |       |        |
| 86           |       |        |       |        |       |        |
| 87           |       |        |       |        |       |        |
| 88           |       |        |       |        |       |        |
| 89           |       |        |       |        |       |        |
| 90           |       |        |       |        |       |        |
| 91           |       |        |       |        |       |        |
| 92           |       |        |       |        |       |        |
| 93           |       |        |       |        |       |        |
| 94           |       |        |       |        |       |        |
| 95           |       |        |       |        |       |        |
| 96           |       |        |       |        |       |        |
| 97           |       |        |       |        |       |        |
| 98           |       |        |       |        |       |        |
| 99           |       |        |       |        |       |        |
| 100          |       |        |       |        |       |        |
| Total Indep  |       |        |       |        |       |        |
| Total Depend |       |        |       |        |       |        |
| Total Claims |       |        |       |        |       |        |